

DECLARATION AND POWER OF ATTORNEY
(Original Application)

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

A BACTERIAL VACCINE VECTOR AND METHODS OF USE THEREOF
the specification of which (check one)

☐ is attached hereto.

☒ was filed on MARCH 7, 2000
as Application No. 09/520,207

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to herein.

I acknowledge the duty to disclose information which is material to patentability in accordance with Title 37, Code of Federal Regulations, Section 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, Section 119(a)-(d), of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

FOREIGN PRIORITY APPLICATION(S)

			Priority Claimed
			<input type="checkbox"/> Yes <input type="checkbox"/> No
_____ (Number)	_____ (Country)	_____ (Day/month/year filed)	
			<input type="checkbox"/> Yes <input type="checkbox"/> No
_____ (Number)	_____ (Country)	_____ (Day/month/year filed)	

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional patent application(s) listed below and have also identified below any United States provisional patent application(s) having a filing date before that of the application on which priority is claimed:

PROVISIONAL PRIORITY PATENT APPLICATION(S)

		Priority Claimed
		<input type="checkbox"/> Yes <input type="checkbox"/> No
_____ (Application No.)	_____ (Filing Date)	
		<input type="checkbox"/> Yes <input type="checkbox"/> No
_____ (Application No.)	_____ (Filing Date)	

And I hereby appoint Ronald L. Panitch, Registration No. 22,825; William W. Schwarze, Registration No. 25,918; Alan S. Nadel, Registration No. 27,363; Leslie L. Kasten, Jr., Registration No. 28,959; Joel S. Goldhammer, Registration No. 22,130; John Jamieson, Jr., Registration No. 29,546; Martin G. Belisario, Registration No. 32,886; Lynda L. Calderone, Registration No. 35,837; Steven H. Meyer, Registration No. 37,189; Randolph J. Huis, Registration No. 34,626; Clark A. Jablon, Registration No. 35,039; Christopher Egolf, Registration No. 27,633; Kathryn Doyle Leary, Registration 36,317; Gary D. Colby, Registration No. 40,961; and Catherine M. Joyce, Registration No. 40,668, as my attorneys or agents with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

Address all correspondence to **PANITCH SCHWARZE JACOBS & NADEL,**
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19103-7086. Please direct all communications and telephone calls to **Kathryn Doyle Leary,**
Ph.D., J.D. at 215-567-1284.

I hereby declare that all statements made herein of my own knowledge are true
and that all statements made on information and belief are believed to be true; and further that
these statements were made with the knowledge that willful false statements and the like so made
are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United
States Code and that such willful false statements may jeopardize the validity of the application
or any patent issued thereon.

Full name of sole
or first inventor Fred R. Frankel

Inventor's Signature *Fred R. Frankel*

Date 12/5/97

Residence Philadelphia, Pennsylvania

Citizenship United States of America

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CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

No. 5907

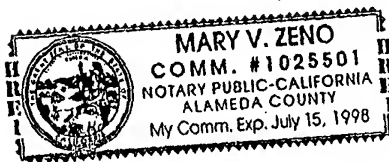
State of CALIFORNIA

County of ALAMEDA

On December 11, 1997 before me, Mary V. Zeno
DATE NAME, TITLE OF OFFICER - E.G., "JANE DOE, NOTARY PUBLIC"

personally appeared Daniel A. Portnoy
NAME(S) OF SIGNER(S)

☐ personally known to me - OR - ☐ proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.



WITNESS my hand and official seal.

Mary V. Zeno Mary V. Zeno
SIGNATURE OF NOTARY

OPTIONAL

Though the data below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent reattachment of this form.

CAPACITY CLAIMED BY SIGNER

- ☐ INDIVIDUAL
☐ CORPORATE OFFICER

TITLE(S)

- ☐ PARTNER(S) ☐ LIMITED
☐ GENERAL
☐ ATTORNEY-IN-FACT
☐ TRUSTEE(S)
☐ GUARDIAN/CONSERVATOR
☐ OTHER: _____

SIGNER IS REPRESENTING:
NAME OF PERSON(S) OR ENTITY(IES)

DESCRIPTION OF ATTACHED DOCUMENT

TITLE OR TYPE OF DOCUMENT

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SIGNER(S) OTHER THAN NAMED ABOVE

Full name of second joint
inventor, if any

Daniel A. Portnoy

Inventor's Signature

Daniel A. Portnoy

Date

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